1,16,29,43,61,68,75,

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10756947

				, , ,		```						
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL OLABAG			(Column 1)		(Column 2)		· .	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			84		-	· · · · · · · · · · · · · · · · · · ·		RATE	FEE].	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			84 mi	nus 20=	*	64		X\$ 9=		OR	X\$18=	1152
INDEPENDENT CLAIMS			7 minus 3 = * 4			6		X43=		OR	X86=	7264
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		1 1	+290=	- 7 - 7 - 7
* If	the difference	e in column 1 is	less than zero, enter "0" in column 2			column 2		TOTAL	<u> </u>	OR	TOTAL	22//
CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	OR	OTHER	MAN THAN
		(Column 1)	(Column 2) (Column 3)					SMALL	ENTITY	OR	SMALL	
		CLAIMS		HIGH		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	lr		L A D D L	1 1		
AMENDMENT A	·	REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> </u>		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
							L					
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
		CLAIMS		HIGHE	ST		lr		ADDI-	} · [· · · · · · · · · · · · · · · · · · ·	ADDI-
B		REMAINING		NUMB		PRESENT		RATE	TIONAL		DATE	TIONAL
Z		AFTER AMENDMENT		PREVIO PAID F		EXTRA		HAIL	FEE		RATE	FEE
AMENDMENT	Total	*	Minus	**	·			X\$ 9=	ree_	OR	X\$18=	FEE
MEN	Independent	*	Minus	***		=		X43=		ŀŀ	X86=	
٥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┝	740-		OR		
							L	+145=		OR	+290=	•
						•	A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
			٠									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	*	Minus	**	<u> </u>	=	F	X\$ 9=	<u> </u>	OR	X\$18=	FEE
	Independent	*	Minus	***		=	\vdash	X43=		.	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A43=		OR	∧ 00=	
* If the entry in column 1 is loop than the entry in column 2 years 107 is column 2										OR	+290=	
**	f the "Highest Nur	nber Pr viously Pa	id For IN THIS	S SPACE is	less thar	20, enter "20."	АГ	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
-**I	t the "Highest Nui The "Highest Num	mber Previously Pa ber Previously Paid	id For" IN THIS d For" (Total or	S SPACE is Independer	less than nt) is the	n 3, enter "3." highest number		. –	ropriate box	•		